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Attorney Docket No. 17853-039



30623

PATENT TRADEMARK OFFICE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Joseph Arruda et al.
Serial No.: 09/944,625
Filing Date: August 31, 2001
For: CAP WITH RETRACTABLE STYLUS
Examiner: Not Yet Assigned
Art Unit: Not Yet Assigned

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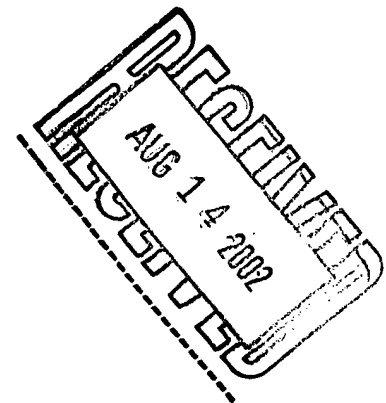
Commissioner for Patents
Washington, DC 20231

TRANSMITTAL

Sir:

1. Transmitted herewith for filing in the above-identified patent application is:

- ☒ this Preliminary Amendment B Transmittal;
- ☐ Response Transmittal;
- ☐ Request for Continued Examination (RCE);
- ☒ Information Disclosure Statement (IDS);
- ☒ Copies of Cited References A1-A6;
- ☒ Modified Form 1449/PTO (1 page in duplicate);
- ☒ Attachment A - Claim Amendments with Markings;
- ☒ Attachment B - Abstract with Markings; and
- ☒ a Return Postcard.



EXTENSION OF TERM

2. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.

(a) ☐ Applicant petitions for an extension of time under 37 CFR 1.136

Extension (months)	Fee for other than small entity	Fee for small entity
<input type="checkbox"/> one month	\$110.00	\$55.00
<input type="checkbox"/> two months	\$400.00	\$200.00
<input type="checkbox"/> three months	\$920.00	\$460.00
<input type="checkbox"/> four months	\$1,440.00	\$720.00

Fee \$ _____

If an additional extension of time is required, please consider this a petition therefor.

Applicant(s): Joseph Arru et al.
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- ☐ An extension for _____ months has already been secured and the fee paid therefor of \$_____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$

OR

- (b) ☐ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicants have inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

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3. The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

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CLAIMS AS AMENDED						
	(1)		(2)	(3)		
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT NUMBER EXTRA	RATE	FEE
TOTAL CLAIMS	12	minus	20	0	x 18.00	\$0.00
INDEPENDENT CLAIMS	4	minus	3	1	x 84.00	\$84.00
MULTIPLE DEPENDENT CLAIM ADDED	No				\$	
					TOTAL	\$84.00
If applicant has small entity status under 37 CFR 1.9 and 1.27, then divide total fee by 2 and enter amount here.				SMALL ENTITY TOTAL		\$0.00

- (c) ☐ No additional fee for claims is required.

OR

- (d) ☒ Total additional fee for claims required **\$84.00**.

FEE PAYMENT

5. ☒ Attached is a check in the sum of **\$84.00** for additional independent claim.
☐ Attached is a check in the sum of \$_____ for RCE fee.
☐ Charge Deposit Account No. 50-0311 the sum of \$_____. A duplicate copy of this transmittal is attached.

Applicant(s): Joseph Arra et al.
U.S.S.N.: 09/944,625

☒ Please charge any additional fees which may be due, or credit any overpayment, to Deposit Account Number 50-0311, Ref. No. 17853-039. A duplicate copy of this transmittal is attached.

Respectfully submitted,



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Date: March 18, 2002

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